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** CONTINUING DATA *****

This application is a DIV of 10/179,373 06/26/2002
which is a CIP of 10/035,045 01/03/2002 PAT 7,241,880
and is a CIP of 09/897,427 07/03/2001 PAT 6,955,887
and is a CIP of 09/799,629 03/07/2001 PAT 7,244,835

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 01/28/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 15	TOTAL CLAIMS 42	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

21967

TITLE

RECOMBINANT METHODS FOR EXPRESSING A FUNCTIONAL SWEET (T1R2/T1R3) TASTE RECEPTOR

FILING FEE RECEIVED 1323	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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